

Please type a plus sign (+) inside this box

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications
under 37 CFR 1.53(b))

Attorney Docket No. SPLX.P0047

First Named Inventor: Steven Teig

Title: Method and Apparatus for Storing Routes

Express Mail Label No. EL624679853US

J1017 U.S. PTO
J1017 U.S. P10
J1017 U.S. P10
J1017 U.S. P10

CERTIFICATE OF MAILING BY "EXPRESS MAIL"

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Date of Deposit: January 4, 2002

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and is addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231.

Man Adeli

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form
(Submit an original, and a duplicate for fee processing)
2. Applicant claims small entity status.
3. Specification -- Total Pages **173**
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawing(s) (35 U.S.C. 113) -- Total Sheets **74**
5. Oath or Declaration -- Total Pages **3**
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 C.F.R. § 1.63(d))
(for continuation/divisional with Box 18 completed)
 - i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting
inventor(s) named in the prior application, see
37 C.F.R. §§ 1.63(d) and 1.33(b).
6. Application Data Sheet. See 37 CFR 1.76
7. CD-ROM or CD-R in dup, lg. table or Comp. Prog (Appendix)

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. Computer Readable Copy
 - b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies); or
 - ii. paper
 - c. Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. Assignment Papers (cover sheet & document(s))
10. 37 C.F.R. §3.73(b) Statement Power of Attorney
(when there is an assignee)
11. English Translation Document (if applicable)
12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
13. Preliminary Amendment
14. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. Request and Certification under 35 U.S.C. 122(b)(2)(B)(i).
Applicant must attach form PTO/SB/35 or its equivalent.
(if foreign priority is claimed)
17. Other:

18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No:
Prior application information: Examiner: Group/Art Unit:

For **CONTINUATION or DIVISIONAL APPS** only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

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P.O. Box 51860 - Palo Alto, California 94303-0728 U.S.A.
Telephone: (650) 934-0470, ext. 102; Facsimile: (650) 934-0475

Customer Number of Bar Code Label
23349

Name	Mani Adeli	Registration Number:	39,585
Signature		Date:	January 4, 2002

FEE TRANSMITTAL FORM for FY 2001

		Complete if Known	
		Application Number	
		Filing Date	January 4, 2002
		First Named Inventor	Steven Teig
		Examiner Name	<none yet>
		Group / Art Unit	<none yet>
TOTAL AMOUNT OF PAYMENT	\$740.00	Attorney Docket Number	SPLX.P0047

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)																																																																																																																	
<input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: Deposit Account Number: 50-1128 Deposit Account Name: Stattler, Johansen & Adeli, LLP <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17 <input checked="" type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card Form <input type="checkbox"/> Other		3. ADDITIONAL FEES <table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Code</td> <td>Fee (\$)</td> <td>Code</td> <td>Fee (\$)</td> </tr> <tr> <td>105</td> <td>130</td> <td>205</td> <td>65</td> </tr> <tr> <td>127</td> <td>50</td> <td>227</td> <td>25</td> </tr> <tr> <td>139</td> <td>130</td> <td>139</td> <td>130</td> </tr> <tr> <td>147</td> <td>2,520</td> <td>147</td> <td>2,520</td> </tr> <tr> <td>112</td> <td>920*</td> <td>112</td> <td>920*</td> </tr> <tr> <td>113</td> <td>1,840*</td> <td>113</td> <td>1,840*</td> </tr> <tr> <td>115</td> <td>110</td> <td>215</td> <td>55</td> </tr> <tr> <td>116</td> <td>390</td> <td>216</td> <td>195</td> </tr> <tr> <td>117</td> <td>890</td> <td>217</td> <td>445</td> </tr> <tr> <td>118</td> <td>1,390</td> <td>218</td> <td>695</td> </tr> <tr> <td>128</td> <td>1,890</td> <td>228</td> <td>945</td> </tr> <tr> <td>119</td> <td>310</td> <td>219</td> <td>155</td> </tr> <tr> <td>120</td> <td>310</td> <td>220</td> <td>155</td> </tr> <tr> <td>121</td> <td>270</td> <td>221</td> <td>135</td> </tr> <tr> <td>138</td> <td>1,510</td> <td>138</td> <td>1,510</td> </tr> <tr> <td>140</td> <td>110</td> <td>240</td> <td>55</td> </tr> <tr> <td>141</td> <td>1,240</td> <td>241</td> <td>620</td> </tr> <tr> <td>142</td> <td>1,240</td> <td>242</td> <td>620</td> </tr> <tr> <td>143</td> <td>440</td> <td>243</td> <td>220</td> </tr> <tr> <td>122</td> <td>130</td> <td>122</td> <td>130</td> </tr> <tr> <td>123</td> <td>50</td> <td>123</td> <td>50</td> </tr> <tr> <td>126</td> <td>240</td> <td>126</td> <td>240</td> </tr> <tr> <td>581</td> <td>40</td> <td>581</td> <td>40</td> </tr> <tr> <td>146</td> <td>710</td> <td>246</td> <td>355</td> </tr> <tr> <td>179</td> <td>710</td> <td>279</td> <td>355</td> </tr> <tr> <td colspan="2">SUBTOTAL (1) \$740</td> <td colspan="2">Fee Paid</td> </tr> </tbody> </table>		Large Entity	Small Entity	Fee Description	Fee Paid	Code	Fee (\$)	Code	Fee (\$)	105	130	205	65	127	50	227	25	139	130	139	130	147	2,520	147	2,520	112	920*	112	920*	113	1,840*	113	1,840*	115	110	215	55	116	390	216	195	117	890	217	445	118	1,390	218	695	128	1,890	228	945	119	310	219	155	120	310	220	155	121	270	221	135	138	1,510	138	1,510	140	110	240	55	141	1,240	241	620	142	1,240	242	620	143	440	243	220	122	130	122	130	123	50	123	50	126	240	126	240	581	40	581	40	146	710	246	355	179	710	279	355	SUBTOTAL (1) \$740		Fee Paid	
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Name	Mahi Adeli	Registration No. (Attorney/Agent)	39,585	Telephone	(650) 934-0470 ext. 102
Signature	<i>Mahi Adeli</i>		Date	January 4, 2002	